a horrific notion to our Nation's doctors, but it is a horrific notion to each American because doctors believe, as Americans believe, that social justice is given out one patient at a time.

But the President's adviser, Dr. Emanuel, believes communitarianism should guide decisions on who gets care. He says medical care should be reserved for the nondisabled. So watch out if you're disabled. Care should be reserved for the nondisabled, not given to those who are "irreversibly" prevented from becoming participating citizens. "An obvious example," he said, "is not guaranteeing health services to patients with dementia."

We just lost my father-in-law to dementia 2 months ago. I thank God that the doctors were able to alleviate my poor father-in-law's symptoms at the end of his life at age 85.

\Box 1945

Apparently, under the Democrats' health care plan, my father-in-law would not have received the high quality of care that he received in his last 2 months of life. Or if you're a grandmother with Parkinson's or a child with cerebral palsy, watch out.

In fact, the President's adviser defends discrimination against older patients. He writes: "Unlike allocation by sex or race, allocation by age is not invidious discrimination. Every person lives through different stages of life rather than being a single age. Even if a 25-year-old receives priority over 65-year-olds, everyone who is 65 now was previously 25."

These bills that are being rushed through Congress right now, maybe even this week, are going to cut over \$500 billion out of Medicare in the next 10 years, putting it on the backs of our State legislature to fill the gaps. Knowing how unpopular these cuts are, the President's Budget Director, Peter Orszag, has urged Congress to delete their own authority over Medicare to a new Presidentially appointed bureaucracy that will not be accountable to the public.

Here is the President's next adviser, Dr. David Blumenthal. He recommends that we slow medical innovation in order to control health spending. You heard me right. He said let's slow medical innovation to control health spending. He has long advocated government health spending controls, although he concedes they are associated with longer waits and reduced availability of new and expensive treatment and devices, but he calls it debatable whether the timely care Americans get is worth the cost.

Mr. Speaker, Americans need to wake up and read what the President and his advisers are saying. It may scare them to go to the phones and call their Members.

The SPEAKER pro tempore. Under a previous order of the House, the gentle-woman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

THE RISING COSTS OF HEALTH CARE AND THE NEED FOR A PUBLIC OPTION

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Mexico (Mr. Luján) is recognized for 5 minutes.

Mr. LUJÁN. Mr. Speaker, at a time when families throughout my district and throughout our Nation are struggling with the rising costs of health care, a robust public option will expand choice and increase competition, driving down costs and making affordable health care a reality.

We need a strong public option for the single mother in my district who changed jobs and lost her insurance, who deserves the chance to get the coverage she needs for herself and for her kids.

We need health care reform for the self-employed businessperson who will finally have a chance to get affordable, comprehensive health care without worrying about constraints on his business.

There should be no question that our current health care system is broken. We have an opportunity to work with one another to truly look after the American people and make a difference in their lives. We need a strong public option because our constituents, our constituents, deserve affordable, accessible health care.

Mr. Speaker, we have come to work. We have come to look after the general welfare of the American people. Year after year we have had an opportunity, and we have squandered it, to be able to address the problems that are afflicting the American people, people struggling today. And we have an opportunity to either work to come up with some solutions or not present any ideas.

Mr. Speaker, we have some great ideas here, and it is about time that we take some action.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

REVISIONS TO THE 302(a) ALLOCATIONS AND BUDGETARY AGGREGATES ESTABLISHED BY THE CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2010

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from South Carolina (Mr. SPRATT) is recognized for 5 minutes.

Mr. SPRATT. Mr. Speaker, under section 423(a)(1) of S. Con. Res. 13. the concurrent resolution on the budget for fiscal year 2010, I hereby submit an adjustment to the budget aggregates and the 302(a) allocation for the Committee on Appropriations for fiscal year 2010. Section 423(a)(1) of S. Con. Res. 13 permits the chairman of the Committee on the Budget to adjust discretionary spending limits for overseas deployments and other activities when these activities are so designated. Such a designation is included in the bill H.R. 3326 (Making appropriations for the Department of Defense for the fiscal year ending September 30, 2010, and for other purposes). Corresponding tables are attached.

This adjustment is filed for the purposes of sections 302 and 311 of the Congressional Budget Act of 1974, as amended. For the purposes of the Congressional Budget Act of 1974, as amended, this adjusted allocation is to be considered as an allocation included in the budget resolution, pursuant to section 427(b) of S. Con. Res. 13.

BUDGET AGGREGATES

[On-budget amounts, in millions of dollars]

	Fiscal year 2009	Fiscal year 2010	Fiscal years 2010–2014
Current Aggregates: 1			
Budget Authority	3,668,788	2,882,117	n.a.
Outlays	3,357,366	2,999,049	n.a.
Revenues	1,532,579	1,653,728	10,500,149
Change for Appropriations adjustments to date:			
Budget Authority	0	0	n.a.
Outlays	0	3,514	n.a.
Revenues	0	0	0
Revised Aggregates:			
Budget Authority	3,668,788	2,882,117	n.a.
Outlays	3,357,366	3,002,563	n.a.
Revenues	1,532,579	1,653,728	10,500,149

¹ Current aggregates do not include the disaster allowance assumed in the budget resolution, which if needed will be excluded from current level with an emergency designation (section 423(b)). n.a. = Not applicable because annual appropriations Acts for fiscal years 2011 through 2014 will not be considered until future sessions of Congress.